

## **Preventive Health Initiatives**

*Objective 4.1: By 2030, increase the percentage of adolescents, ages 12 to 17, who have had a preventive health visit, which included a behavioral health screening, in the past year to 60%.*

### American Academy of Pediatrics Collaboration

In FFY27, the Title V team will explore participation in the American Academy of Pediatrics (AAP) Cross-sector Partnerships to Support Adolescent and Young Adult Health Learning Collaborative. This national opportunity is designed to support state Title V programs and their partners in building and sustaining cross-sector models that improve adolescent health outcomes, including through connections between clinical, school, public health, and community-based settings.

### Youth Health Guide Updates and Campaign

The updated Youth Health Guide will launch in FY2027, along with an accompanying targeted health messaging campaign, both directly informed by focus groups conducted in partnership with DCCCA. These focus groups engaged more than 200 Kansas youth and provided a strong qualitative foundation for culturally responsive, youth-centered materials.

The updated Youth Health Guide will be revised to reflect the themes, priorities, and language preferences identified through the youth focus groups. The guide will serve as a primary resource for both the well visit promotion effort and the broader adolescent health messaging campaign.

Planned distribution and campaign activities include:

- Distributing the updated Youth Health Guide through school nurses and local health departments across Kansas, with priority given to partners already engaged in Bright Futures or adolescent health programming.
- Developing a targeted social media campaign aligned with guide content, designed to reach adolescents directly on platforms they actively use, with messaging shaped by youth voice data from the youth focus groups.
- Creating partner-ready digital toolkits (including graphics, caption templates, and suggested posting schedules) to support school nurses, local health departments, and community organizations in amplifying campaign messaging.
- Aligning campaign timing with high-impact windows such as National Adolescent Health Month (May), back-to-school season, and local health department calendar cycles.
- Evaluating reach and engagement of the social media campaign and guiding distribution through tracking metrics and partner feedback.

### Bright Futures Training & Technical Assistance

Kansas Title V programs continue to support and promote the use of the Bright Futures™ Guidelines to maternal and child health (MCH) partners, providers, and grantees as the evidence-based standard for delivering comprehensive preventive care to adolescents.

Key actions will include:

- Ensuring MCH Aid to Local (ATL) grantees and other Title V-funded programs continue to have access to Bright Futures™ toolkits, client handouts, and provider education materials.
- Encouraging the use of Bright Futures™ screening recommendations, particularly for behavioral health, vision, and hearing, during adolescent well visits, and supporting the gap-filling roles of MCH ATL agencies.
- Promoting available training resources and self-guided tools such as:
  - The Bright Futures™ Toolkit and Adolescent Toolkit Training,
  - The Pediatric Mental Health Toolkit,
  - The Got Transition Health Care Transition Readiness Quiz
- Coordinating with internal and external partners (such as the Kansas Chapter of the American Academy of Pediatrics (KAAP) and KSKidsMAP) to ensure public and private providers are aware of available resources and training opportunities.

### Behavioral Health Integration Support

Contingent upon funding availability, Kansas MCH will continue to leverage KSKidsMAP to strengthen primary care physician and clinician (PCP) capacity to identify, assess, and manage adolescent behavioral health concerns. KSKidsMAP provides real-time psychiatric consultation, training, support for screening implementation, and resource and referral guidance to PCPs, equipping them to incorporate evidence-based behavioral health screening into routine adolescent care. Planned activities will include continued delivery of training on validated screening tools, brief interventions, and clinical decision-making, as well as case-based consultation to support management of common adolescent conditions such as depression, anxiety, substance use, and suicide risk.

KSKidsMAP will also continue to support PCPs in integrating behavioral health screening into clinical workflows, including guidance on screening frequency, documentation, and follow-up care. These efforts aim to improve early identification of behavioral health concerns, increase timely access to appropriate treatment and supports, and reduce unmet need among adolescents. Through consultation and training, KSKidsMAP helps PCPs move beyond screening alone to ensure appropriate response, including brief intervention, referral, and ongoing care coordination.



Sustaining these services is a critical consideration for the upcoming reporting period. Federal funding through the HRSA Pediatric Mental Health Care Access (PMHCA) program is scheduled to expire in September 2026, creating potential risk to the continuation of services at current capacity. While Rural Health Transformation Grant funding may support continued KSKidsMAP activities in rural communities, this funding is limited in scope. It does not fully address the needs of physicians in urban communities. As such, additional funding sources will need to be identified and secured to ensure equitable, statewide access to KSKidsMAP services and to sustain progress toward increasing behavioral health screening and follow-up among adolescents.